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To: Company: Fax Number: Tel Number:
Examiner: Charles R. USPTO +1.571.273.8300
Kasenge

From: Troy M. Schmelzer

Date: June 20, 2006

Time:

Total number of pages incl. cover page: 15

For internal purposes only:

Client number: 81754.0100

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MESSAGE:

Patent Application No.: 10/691,126; Our Ref. 81754.0100

I hereby certify that the following documents:

☒ Amendment/Amendment Transmittal Letter

are being facsimiled to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above-identified application.

June 20, 2006
Date of Deposit


Judith Bacchi

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WLA - 1754/0100 - 267077 v1

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FORM PT-0-1083

81754.0100

Patent Application No. 10/691,126

JUN 20 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Kunihiro KAWAHARA

Serial No: 10/691,126

Filed: October 21, 2003

For: Method of Intercompany Information-Sharing System,
and Computer Program

Art Unit: 2125

Examiner: Kasenge, Charles R.

I hereby certify that this correspondence
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Name

06/20/06

Signature

Date

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Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	15	-	20	0	LG=\$60 SM=\$25	\$0
INDEPENDENT CLAIMS FEE	10	-	10	0	SM=\$100 LG=\$200	\$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180	\$0
Independent Claims: 1, 5, 6, 7, 8, 9, 10, 11, 13, 20					TOTAL	\$0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total of